



CHANGE OF CORRESPONDENCE ADDRESS *Application*

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

| | |
|------------------------|-----------------------|
| Application Number | 09/537,659 |
| Filing Date | March 29, 2000 |
| First Named Inventor | Krishna Murthy et al. |
| Art Unit | 2123 |
| Examiner Name | |
| Attorney Docket Number | 199-1255 |

Please change the Correspondence Address for the above-identified application

to:



Customer Number

010534

Type Customer Number here

Place Customer
Number Bar Code
Label here

OR

RECEIVED

| | | | | | |
|-------------------------------------|---------------------------|-----------------------------|--------------|-----|-------|
| <input checked="" type="checkbox"/> | Firm or Individual Name | Bliss McGlynn & Nolan, P.C. | MAR 08 2002 | | |
| Address | 2075 West Big Beaver Road | Technology Center 2100 | | | |
| Address | Suite 600 | | | | |
| City | Troy | State | Michigan | ZIP | 48084 |
| Country | U.S.A. | | | | |
| Telephone | 248-649-6090 | Fax | 248-649-6299 | | |

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name Daniel H. Bliss (Reg. No. 32,398)

Signature

Date

February 19, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of one (1) forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.